

ISS Portfolio

Integrated System Services *in order to develop an* *Individual Service Strategy* *which outlines and documents* *Incremental Skill Successes*

Purpose

Design an ISS that:

- recaptures the **original intent** of the tool;
- is **user friendly**;
- is written from the **customer perspective**;
- provides customers and staff with **usable documents** which meet the needs of the customer, the program and the system; and
- **supports the system integration and partnership model** used for youth services; and,
- **creates a paper trail** that supports program outcomes.

Tools

The ISS Portfolio was developed as a **package of tools** that supports the system and service partnership processes currently under redesign for all youth workforce development initiatives.

The ISS Portfolio consists of three parts, that when used together, provide a snapshot of where the customer is when they enter the system, the goals that will assist the customer gain skills and experiences needed to successfully transition to his or her career goals, and documentation of service interventions across multiple program activities.

The three tools are:

1. **My Personal Strengths and Skills Growth Inventory** (pages 3-9)
2. **My Personal Goal and Service Plan** (page 11)
3. **Progress Notes** (documented in Workforce Plus)

My Personal Strengths and Skills Growth Inventory

What this tool is:

The intent of this tool is to provide an inventory or snapshot of the current strengths and training needs of the customer.

This tool is not the assessment process, not the assessment tool used to collect data, and not a justification for enrollment into local area funded or partner services.

This tool is a summary of assessment data at a given point in time which can be used to determine the most appropriate goals and mix of service interventions. It is a way to provide the customer with an inventory of where he/she currently is, and share common data with multiple service providers so they have a more holistic view of the customer.

How to use this tool:

Once the initial assessment process has been completed, **the assessment providers should complete the inventory** (or summary of findings) highlighting the strengths the customer already possesses and the areas where training is needed as a foundation for developing service intervention steps. Once the summary is completed, a copy should be retained in the client's file, and the young person should also get a copy.

For customers enrolled in local area funded programs, this profile becomes a portable document that should also be shared with all system partners that deliver services to the customer.

Additionally, it is required that an updated inventory be produced at least on an annual basis to document incremental skills growth and capture new (and ever-changing) situations the customer may be experiencing.

When to use this tool:

This tool would be filled out after the initial, in-depth assessment process has been completed as a way to share assessment outcomes with the customer and with any service provider who will be assisting the customer.

My Personal Strengths and Skills Growth Inventory

Name

Social Security Number

Assisting Agency

Date Compiled

This *Personal Strengths and Skills Growth Inventory* has been compiled specifically for you, based on information collected during your skills review. It is an initial plan to assist you in taking the next steps in your journey toward developing the skills you need and finding the job you want. Working from this, you now:

- *Have ideas about what types of jobs you want and at which you would be good.*
 - *Know what skills you already have that will get you to your goals.*
 - *Can identify what else you need to reach your goals.*
 - *Can figure out which services, out of a giant pool of resources, are the absolute best for you.*
 - *Can provide others with information to get to know you so they can best help you.*
 - *Have a way to track your successes and stay on course for reaching your goals.*
-

Congratulations on the work you've done so far and best of luck in reaching your goals.

We want to be a partner with you each step of the way.

Interests and Activities Inventory

I am good at:

I enjoy doing:

Career Goals Inventory

The types of work I like are:

I am interested in:

My career goal is:

Work Readiness Inventory

I understand that the following skills are needed to successfully find and hold a job and advance in the labor market. My goal is to obtain all of them and be able to share with employers how I am able to use them.

Transition Skills

- | | |
|--|--|
| 1. I understand my learning style <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 6. I have all my personal documents available and organized <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 2. I schedule my time wisely <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 7. I understand the implication of entering into contractual agreements <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 3. I know how to access educational services to build my skills <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 8. I have a checking account and manage my money well <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 4. I have transportation options available to get to activities on time <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 9. I know how to access community resources when needed <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 5. I can manage crisis situations <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 10. I can manage living on my own <input type="checkbox"/> yes <input type="checkbox"/> need to work on |

Job Getting Skills

- | | |
|---|--|
| 1. I have explored my career decision <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 7. I have a resume <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 2. I know how to use labor market information <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 8. I effectively use the telephone in my job search <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 3. I know how to search for a job <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 9. I know how to interview <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 4. I know how to use the computer to look and apply for jobs <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 10. I know how to follow up after an interview <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 5. I can complete applications <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 11. I understand employment-related laws <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 6. I know how to write a business letter <input type="checkbox"/> yes <input type="checkbox"/> need to work on | |

Job Keeping Skills

Resources

- | | |
|--|---|
| 1. I follow work schedules <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 3. I complete workplace tasks in a timely manner <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 2. I show up for work on time, every time <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 4. I can manage multiple tasks at the same time <input type="checkbox"/> yes <input type="checkbox"/> need to work on |

Interpersonal

- | | |
|---|---|
| 5. I am polite and friendly at work <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 10. I interact appropriately with authority <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 6. I assert myself when presenting my ideas <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 11. I interact well with co-workers <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 7. I speak, listen, write, and interact well at work <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 12. I respond appropriately to customer requests <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 8. I communicate thoughts and ideas clearly <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 13. I can resolve workplace conflicts <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 9. I ask for feedback on my performance <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 14. I understand how my work impacts others <input type="checkbox"/> yes <input type="checkbox"/> need to work on |

Information

- | | |
|--|---|
| 15. I select the appropriate information to complete my tasks <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 18. I ask appropriate questions when I don't understand work assignments <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 16. I use appropriate language at work <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 19. I respond appropriately to instructions <input type="checkbox"/> yes <input type="checkbox"/> need to work on |
| 17. I can research issues and situations <input type="checkbox"/> yes <input type="checkbox"/> need to work on | 20. I complete documents accurately <input type="checkbox"/> yes <input type="checkbox"/> need to work on |

Systems

21. I follow established procedures when using work equipment

☐ yes ☐ need to work on

23. I know where and to whom to go when a problem arises

☐ yes ☐ need to work on

22. I follow safety procedures

☐ yes ☐ need to work on

Technology

24. I select appropriate tools and equipment to compete my work

☐ yes ☐ need to work on

26. I use equipment the way intended

☐ yes ☐ need to work on

25. I can maintain equipment and technology

☐ yes ☐ need to work on

Thinking

27. I can recognize and solve problems

☐ yes ☐ need to work on

29. I specify goals to achieve

☐ yes ☐ need to work on

28. I recognize and apply new knowledge

☐ yes ☐ need to work on

Personal Qualities

30. I exert a high level of effort

☐ yes ☐ need to work on

35. I demonstrate trustworthiness

☐ yes ☐ need to work on

31. I seek out information

☐ yes ☐ need to work on

36. I understand the impact of violating organizational values

☐ yes ☐ need to work on

32. I believe in my self-worth

☐ yes ☐ need to work on

37. I demonstrate honesty

☐ yes ☐ need to work on

33. I am a self-starter and initiate work activities

☐ yes ☐ need to work on

38. I wear appropriate and clean clothing on the job

☐ yes ☐ need to work on

34. I demonstrate self control

☐ yes ☐ need to work on

39. I stick to the task even when it is undesirable

☐ yes ☐ need to work on

Educational Inventory

I have graduated from high school or obtained my GED ☐ yes ☐ not yet

I am currently attending school at _____.

The highest grade that I have completed is _____.

My reading level is _____

| <u>Major Strengths</u> | <u>Areas for Improvement</u> |
|--|--|
| | |

My math level is _____

| <u>Major Strengths</u> | <u>Areas for Improvement</u> |
|--|--|
| | |

I have earned the following certificates or diplomas:

I am currently attending college or a training course at:

Life and Family Structure Inventory

| Supportive Service | Notes |
|--|-------|
| My family support structure <input type="checkbox"/> is in place <input type="checkbox"/> needs work | |
| I have adequate living arrangements <input type="checkbox"/> yes <input type="checkbox"/> no | |
| My living expenses are <input type="checkbox"/> covered <input type="checkbox"/> not covered | |
| I have transportation <input type="checkbox"/> yes <input type="checkbox"/> no | |
| I have health related issues <input type="checkbox"/> no <input type="checkbox"/> yes | |
| I need mental health treatment <input type="checkbox"/> no <input type="checkbox"/> yes | |
| I need substance abuse treatment <input type="checkbox"/> no <input type="checkbox"/> yes | |
| I have appropriate work clothing <input type="checkbox"/> yes <input type="checkbox"/> no | |
| I have legal issues that need to be addressed <input type="checkbox"/> no <input type="checkbox"/> yes | |
| I need child care assistance <input type="checkbox"/> no <input type="checkbox"/> yes | |

My Personal Goal and Service Plan

What this tool is:

The intent of this tool is to identify the goal or goals of the customer and the mix of service interventions and system partners who can assist the customer in attaining his/her goals. The goals should build on the strengths the customer already possesses and target the growth areas that are identified on his/her inventory.

This tool is a service plan that should be facilitated by the assessment-providing entity/system case manager in tandem with the customer and the service-providing agencies that will work together to assist the customer.

The customer, as well as each service provider, should have a copy of the service plan as a way to stay focused on the goal, share information on what other services/agencies are working toward the goal, and to reinforce the commitment of each player.

How to use this tool:

This tool is best used when specific, tangible, and attainable goals are identified and service interventions are designed across partners to assist the customer attain the goal. Since there may be multiple providers simultaneously working with the customer to achieve his/her goal, action steps should be outlined with the specific roles of each service providing-agency and the customer's responsibilities.

When to use this tool:

“My Personal Goal and Service Plan” is completed each time a customer has a new goal set. It is recommended that each personal goal be outlined on a separate service plan document. As goals are attained or new goals are set, the tools become a fluid paper trail of service interventions over time and provide a tracking system for system credit toward performance outcomes. The tools also provide tangible benchmarks of success and growth that serve as a motivation to the continued commitment of the customer.

My Personal Goal and Service Plan

Name

Social Security Number

My goal is

| Action Steps to Achieve Your Goal | Agencies and Their Role in Assisting You Reach Your Goal | My Responsibilities in Reaching this Goal |
|-----------------------------------|--|---|
| | | |
| | | |
| | | |
| | | |

Participant Signature/Date

Staff Signature/Date